

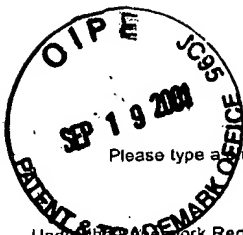
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PTO/SB/01 (10-00)

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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration  
Submitted  
with Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

AAT-12563

First Named Inventor

David A. Learmonth

## COMPLETE IF KNOWN

Application Number

09 / 885855

Filing Date

20 June 2001

Group Art Unit

1614

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Substituted Nitrated Catechols, Their Use In The Treatment Of Some Central And Peripheral Nervous  
System Disorders And Pharmaceutical Compositions Containing Them

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

06/20/2001

as United States Application Number or PCT International

(if applicable).

Application Number

09/885855

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
0015228.0	United Kingdom	06/21/2000	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☒ Customer Number or Bar Code Label **007609** OR ☐ Correspondence address belowName **Rankin, Hill, Porter & Clark LLP**Address **925 Euclid Avenue, Suite 700**

Address

City **Cleveland**State **Ohio**ZIP **44115-1405**Country **U.S.A.**Telephone **(216) 566-9700**Fax **(216) 566-9711**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventorGiven Name (first and middle [if any]) **David Alexander**Family Name or Surname **Learmonth**

Inventor's Signature

*David Alexander Learmonth*Date **14.09.2001**Residence: City **Maia**

State

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Mailing Address

City **Maia**State **Vermoin**ZIP **4470**Country **Portugal**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name (first and middle [if any]) **Patricio Manuel Vierira Araujo**Family Name or Surname **Soares da Silva**

Inventor's Signature

*P. Soares da Silva*Date **14.09.2001**Residence: City **Porto**

State

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Mailing Address

City **Porto**

State

ZIP **4150**Country **Portugal**☐ Additional Inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.